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ABSTRACT

Children are entitled to grow up in secure and nurturing environments that include caring adults; safe streets; decent shelter; adequate nutrition; access to health care and education; and advocacy on their behalf against the toxic influences of society. Far too many children are being referred to special education and mislabeled and medicated. Policy and practices need to be in place that address the real needs of children without doing them unintended harm. This implies avoiding fads and extremes and insuring that research findings are tested in actual classroom settings for validity and replication prior to dissemination. Educators and mental health professionals need to collaborate to provide the science, standards, advocacy, and voice necessary to shape public policy and effective practice for the education and well-being of America's children. (Author)

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It is not my intention to deny or minimize the importance of this panel's focus to assert at the outset of these remarks that "The War for Boys" is, in fact, one front in a larger "War for Children" each of us wages every day.

Children are entitled to grow up in secure and nurturing surroundings, which involves present and caring adult involvement, safe streets and communities, decent shelter and nutrition, universal access to health care, quality schools and challenging instruction, and advocacy on their behalf against the more toxic excesses of contemporary culture. Too many children face the stresses and obstacles of poverty, unstable homes, racism, over-crowded classrooms, dilapidated and unsafe school buildings, and a popular culture that glorifies drugs, guns, and gangsters.

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The research cited by my fellow panelists concerning the special problems facing boys is sobering:

- Boys are nearly 10 times more likely than girls to be diagnosed with Attention Deficit Disorder and twice as likely to be diagnosed with learning disabilities
- Boys account for nearly 70% of students in high school "special classes"
- Of the nearly one million children on Ritalin, 75% are boys
- Although girls are more likely *to attempt* suicide, boys actually are four times more likely to follow through

Our challenge as professionals and citizens who care about kids is to prevent and reduce the instances of suicide, violence, misdiagnosis and over-medication, gender stereotyping, and discrimination among *all* children in society irrespective of gender, ethnicity, social class, sexual orientation, national origin, or race. Recognizing the very real potential obstacles boys face in making their way through society – including the schools – we need to find policy and practice approaches that help solve real problems without causing unintended harm.

Teachers want to do the right thing.

We're grateful for all the help we can get.

That's why AFT, as a union, devotes enormous resources to professional development activities such as our ER&D program – Education Research and

Dissemination – which keeps track of the latest sound research in education and related areas, and through a network of teacher experts, translates theory into practical classroom application in school districts throughout the county.

It's why we sponsor local Teacher Centers for conducting best practices continuing education for teachers and school support staff throughout the school year.

It's why we publish a serious quarterly journal, *The American Educator*, and conduct national conferences devoted exclusively to education policy and practice.

It's why we actively lobby on behalf of the needs of children on the local, state and national levels, even when it means working closely with Administrations we've otherwise opposed.

It's why last month I called for a national program of universal access to high quality pre-kindergarten education – similar to what many other western industrialized countries, like France, provide as a universal right – as a means of giving children, especially those in poor and working class homes, a proper foundation for entering school.

And it's why the AFT strongly supports the availability of health and mental health services for all children and the inclusion of school-based counseling and mental health services as a necessary developmental and educational resource.

That said, educators are no more immune than others to the seductions of the next new idea, even when the findings may not have not been classroom-tested for consequences and results. It's what accounts for the proliferation of

educational fads and the pendulum responses of those charged with determining education policy governing our schools.

For some, much of the impetus behind "The War For Boys" is a corrective reaction to policies borne of an earlier feminist critique of inequalities affecting the schooling and treatment of girls. But much progress has been made for girls. So, while trying to make certain that the needs of boys are not overlooked, it is important to keep the pendulum in mind and to exercise prudence in the way we frame the problems as well as the solutions.

Educators – practitioners and policy makers – will be looking to you for sound research. We need to know more about differences and similarities in learning styles and child development and how to avoid and counteract gender, racial, ethnic and class stereotyping. We need to know how to translate these findings for the education of prospective teachers and for practical application, and we need to know how to do it in ways that do not inadvertently create new self-fulfilling gender stereotypes. Where the research suggests developmental differences associated with gender, we need to know what to look for and be ready with alternative approaches. Not all children, whatever their gender, learn the same way. Some are more physical, others more cerebral. Some need quiet and seclusion, others the stimulation and interaction of small groups, and still others the release of physical activity before settling down to learn. A good teacher will integrate the findings and insights of psychological research and consultation to determine the most appropriate approach for each child. My only caution to you in that regard is to be modest and non-ideological in your claims.

Avoid extremes and insure that your research findings and their methods are tested in actual classroom settings for validity and replication.

Single-gender schools and classrooms may very well work for some children, and we shouldn't rule them out. But we should keep a watchful eye toward correcting for unintended consequences. We live in a pluralistic democracy and we want our children prepared for getting along with and respecting individuals of a gender, ethnicity, race, sexual orientation, physical condition or economic class different from their own.

That's also why teachers and school support staff (including paraprofessionals and bus drivers) need to be educated in and sensitive to differences in the socialization of boys and girls and the extent to which cultural factors in the home and larger society shape learning behavior. And educators need to broaden – and research from the discipline of psychology can help with this – the range of options and strategies available in our professional repertoire for dealing effectively with *all* of our students.

Children deserve to be treated as individuals, not labels. I am in full agreement that the number of children, especially boys, diagnosed with ADD and treated with drugs is alarming.

But in all too many instances, good practice is frustrated by misguided public policy. To state the obvious, in the education of children, size and money matter. Large schools and overflowing classrooms frustrate the efforts of teachers to spend the time necessary to focus on every child in the class. Cutbacks in classroom aides and paraprofessionals only compound the problem.

Yet, as much as we deplore the labeling (and mislabeling) of children, there is a perverse financial incentive for doing so. What local school budgets often will not pay for (individualized attention) federal healthcare dollars targeted to the disabled often will. It's no wonder when faced with losing a child completely or finding a medical or behavioral diagnosis that will shake free federal funds for necessary individualized services, many conscientious teachers, parents, and school officials reluctantly will opt for the latter.

The simple act of seriously reducing class size, I am convinced, would go a long way toward reducing the number of boys who are misdiagnosed with ADD, held back or referred to special education. Also, preventative services and related support services make a great difference and are more cost effective in the long run.

Schools need to be safe, stable, and challenging environments where expectations concerning academic and behavioral standards are clearly articulated and *consistently and constructively* applied. Teacher-to-student-ratios need to be reduced to a manageable scale so that teachers have the time to focus on kids as individuals. And as barriers fall to the advancement of women in a variety of professions, we should make special efforts to recruit talented men (for elementary schools, especially) and members of ethnic, racial, and language minorities into teaching.

In the case of children who demonstrate dangerous or chronically disruptive behavior, districts must provide a continuum of individualized services and alternative placement programs. Balancing the needs of the individual with

the needs of the group is always tricky. Teachers cannot teach, and students cannot learn, in an atmosphere of violent and disruptive misbehavior. Where – for whatever reasons – the best efforts of a caring and competent teacher, psychologist, social worker and counselor have failed to ameliorate persistent violent or disruptive behavior on the part of a student, alternative placements need to be made available.

These services include psychological diagnosis, treatment, and consultation; social work intervention; behavioral management; in-school crisis centers; in-school suspension; and off-campus alternatives. The purpose of such programs should not be to shame and punish, but to provide guidance and support, crisis management, academic instruction, and to help bring about remedial behavior change.

I should say something about the impact of "social toxicity" on boys, and on children in general. As an educator, I oppose censorship. But that does not mean abdicating our roles as adults toward children. It does not mean remaining silent in the face of a continuing onslaught of truly creepy, vulgar and repugnant images purposely marketed to kids via cds, video games, movies and television, and commercial advertising. It is one thing to advocate governmental bans, another to uphold standards of behavior, civility, decorum, and taste. These are not standards anyone needs to split hairs over. We all recognize out-of-control and gratuitous violence when we see it, uncivil and vulgar language when we hear it, age-and-place-inappropriate attire when it's worn, and uncivil behavior when we encounter it. Upholding standards has nothing to do with cultural

imperialism or prudishness. Educators and psychologists – as citizens, professionals and opinion leaders – ought to speak out where and when necessary in order to try to influence parents, performers, celebrities, entertainment industry and advertising executives to do right by our kids.

No discussion of this kind would be complete without at least some mention of guns. They are just too available, and too many kids – mostly boys – get their hands on them, with tragic results. Punishing parents who fail to lock up their firearms, which I support, or stiffening punishment of a young person who has used a gun in the commission of a crime, which needs to be done, still seems like locking the gate after the horse has galloped away. We can restrict the availability of handguns, automatic weapons, and cop-killer ammunition while allowing hunters and target shooters to pursue their avocations. If we're serious about saving our boys – and girls – we're going to have to deal with guns in a serious way.

Clearly, "The War For Boys" does not begin or end at the schoolhouse door. Issues of public policy and individual educational practice are inextricably joined. The easy availability of weapons, the effects of extremes of poverty and wealth in our society, unstable and inattentive households of every class, drugs and alcohol, sexism and homophobia, transience and alienation from community institutions, and the merchandising of unwholesome images and values directly affect how our kids perform and behave in school. As educators and mental health professionals, we must work together to provide the science, collaboration, experience, compassion, discipline, persistence and advocacy

necessary to win sound public policy, shape effective practice and eliminate once and for all the casualties of a war it should never have been necessary to fight.